ANALYSIS OF PATIENTS WITH MALIGNANT SPINAL CORD COMPRESSION AT A SINGLE INSTITUTION

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Introduction: Malignant spinal cord compression (MSCC) is an emergent complication of cancer that can cause pain and potentially irreversible loss of neurologic function. Early recognition and treatment of MSCC offer the best hope for improving outcome. We therefore studied delay in presentation, diagnosis, and treatment of MSCC at a regional medical center.

Method: Analysis was retrospectively performed in 22 patients who were diagnosed with MSCC between November 2004 and February 2013 at South Miyagi Medical Center. We evaluated the intervals from onset of symptoms to presentation and treatment and the clinical outcome.

Results: In almost all patients (21/22 patients), pain was the first symptom of MSCC. Twelve patients had paralysis before treatment. Pain preceded paralysis (motor deficit and/or bladder dysfunction) by 58 days on average (2 to 185 days). Delays from onset of symptoms to visiting hospital were 72 days (15 to 180 days) for 11 patients with newly diagnosed cancer and 8 days (0 to 19 days) for patients who had already been diagnosed with cancer. Seventeen patients received radiotherapy. The median interval from visiting the hospital to start of radiotherapy was 30 days (4 to 80 days). There was no recovery of neurologic dysfunction in five of nine patients who received radiotherapy after paralysis had occurred, whereas neural function was maintained in all of the 8 patients without paralysis.

Conclusion: This study showed that there was a great delay in diagnosis and treatment of MSCC and that this delay resulted in an unfavorable outcome.